## REMARKS

Initially, Applicant expresses appreciation to the Examiner for the courtesies extended in the recent in-person interview conducted with Applicant's representative on November 16, 2006. The amendments and remarks presented herein are consistent with the discussions during the interview. Reconsideration of the above claims is hereby respectfully requested.

The Office Action, mailed September 17, 2006, considered and rejected claims 1-48. Each of the independent claims were rejected under 35 U.S.C. § 103(a) as being unpatentable over Tindal (U.S. Publ. No. 2002/0069271) in view of Richardson (U.S. Publ. No. 2002/0054169).[1]

By this paper, claims 1, 2, 16, 17, 27, 28, 38 and 39 have been amended, claims 49-56 added, and claims 15 and 26 cancelled.[2] Accordingly, following this paper, claims 1-14, 16-25 and 27-56 remain pending, of which claims 1, 16, 27 and 38 are the only independent claims at issue.

As discussed during the interview, Applicant's invention is generally directed to methods, systems and computer readable media for administering personal computer health status. As recited in independent claim 1, for example, a system for administering personal

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[1] In full, claims 1-7, 9, 12, 13, 16-22, 24, 27-33, 35, 38-41, 43 and 48 were rejected under 35 U.S.C. § 103(a) as being unpatentable over Tindal (U.S. Publ. No. 2002/0069271), in view of Richardson (U.S. Publ. No. 2002/0054169). Claim 10 was rejected under 35 U.S.C. § 103(a) as being unpatentable over Tindal (U.S. Publ. No. 2002/0069271), in view of Richardson (U.S. Publ. No. 2002/0054169), and further in view of Jahn, (U.S. Publ. No. 2004/0019803). Claims 14 and 25 were rejected under 35 U.S.C. § 103(a) as being unpatentable over Tindal (U.S. Publ. No. 2002/0069271), in view of Richardson (U.S. Publ. No. 2002/0054169) and Jahn (U.S. Publ. No. 2004/0019803), and further in view of Fabrizi (U.S. Publ. No. 2004/0153748). Claims 8, 23, 34, 36, 42 and 44 were rejected under 35 U.S.C. § 103(a) as being unpatentable over Tindal (U.S. Publ. No. 2002/0069271), in view of Richardson (U.S. Publ. No. 2002/0054169), and further in view of Fabrizi (U.S. Publ. No. 2004/0153748). Claims 11 and 14 were rejected under 35 U.S.C. § 103(a) as being unpatentable over Tindal (U.S. Publ. No. 2002/0069271), in view of Richardson (U.S. Publ. No. 2002/0054169), and further in view of Feng (U.S. Publ. No. 2004/0083243). Claims 15, 26, and 37 were rejected under 35 U.S.C. § 103(a) as being unpatentable over Tindal (U.S. Publ. No. 2002/0069271) in view of Richardson (U.S. Publ. No. 2002/0054169) and further in view of Mellquist (U.S. Patent No. 7,002,921). Claims 45 and 47 were rejected under 35 U.S.C. § 103(a) as being unpatentable over Tindal (U.S. Publ. No. 2002/0069271), in view of Richardson (U.S. Publ. No. 2002/0054169), and further in view of Srivastava et al. (U.S. Publ. No. 2003/0221002). Claim 46 was rejected under 35 U.S.C. § 103(a) as being unpatentable over Tindal (U.S. Publ. No. 2002/0069271), in view of Richardson (U.S. Publ. No. 2002/0054169), and further in view of Cummins (U.S. Publ. No. 2006/0156407). Although the prior art status of the cited art is not being challenged at this time, Applicant reserves the right to challenge the prior art status of the cited art at any appropriate time, should it arise. Accordingly, any arguments and amendments made herein should not be construed as acquiescing to any prior art status of the cited art.

[2] Support for the claim amendments and new claims can be found throughout Applicant's original disclosure, including at least the disclosure on pages 4, 9, 11, 12, 14 and 15 of the originally filed application, and as numbered by Applicant.

computer health so as to provide a cohesive interface for various external health service providers is described. For example, the system includes a provider subsystem that provides services relating to computer health status, including the acquisition of health status information of the personal computer. A health engine subsystem is also provided which processes the health status information and which includes an open framework having a standard interface which allows external service providers to each register one or more provider modules with the health engine subsystem to thereby include multiple registered provider modules from a plurality of different external service providers. Each provider module can acquire health status information for a particular aspect of personal computer health which is different from other aspects acquired by other provider modules of the external service providers. A client user interface subsystem can also be included to report overall health status of the personal computer to the end-user of the personal computer in accordance with the health status notifications.[3]

As discussed during the interview, while Tindal and Richardson generally relate to determining and correcting problems with network devices, they fail, whether alone or in combination, to teach or suggest each and every limitation of the present application. For example, among other things, Tindal and Richardson fail to teach a system in which a health status subsystem includes an open framework that allows multiple external service providers to register therewith, or a client user interface subsystem which reports overall health of the personal computer to the end-user of the personal computer, as recited in combination with the other claim elements.

In particular, Tindal discloses an event manager for a network operating system in which a network manager unit 140 is disposed between a network administrator and various network devices (e.g., routers 100, 105, and optical devices 125, 130) to determine their performance on the network. (¶¶ 11, 17; Fig. 2). The network manager can include a health manager 180 which monitors the overall health of the network or the health of individual network devices. (¶ 39). Messages about the health of the various network devices are published to the administrator via an interface module, and an action manager can implement any desired changes to improve a condition of a network device. (¶¶ 32, 39) Accordingly, the network manager allows the

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[3] Independent claims 16, 27 and 38 are directed to a method (claim 16), computer readable medium (claim 27) and system (claim 38) which generally correspond to the system of claim 1. Accordingly, the comments presented herewith with regard to claim 1 are equally applicable to independent claims 16, 27 and 38.

*administrator* of the network to view, configure and manage the various devices of a network. (¶ 11).

As discussed during the interview, Richardson is similarly directed to a system allowing an administrator of a network to view various network devices and remedy any problems that occur. In particular, Richardson discloses a system in which each network group and network device is illustrated graphically to a remote administrator. (¶¶ 12, 13, 16 and 48). When a critical event occurs, a group and/or device can change color or shape, or otherwise indicate that an error needs correction. (¶ 49). Critical events can include events in which the CPU, disk or memory usage, exceeds a threshold level. (¶¶ 51, 59). Upon viewing the information ir5elated to the critical event, the administrator of the network can drill-down to determine the particular critical event that occurred, and then cause the event to be remedied, or the administrator of the network can otherwise be notified, such as by sending a message to the administrator that a critical event has occurred. (¶¶ 49, 50, 55). As described in Richardson, this allows the administrator to view the problem remote from the network device such that it is not necessary to see the problem on the device itself. (¶ 12).

Accordingly, as discussed during the interview, Tindal and Richardson each teach systems in which an administrator, remote from the network devices being analyzed, is notified of the problem. Accordingly, in contrast to the above claims, in which *the end-user* of the personal computer whose health status is being determined is notified of the computer's health status, Tindal and Richardson teach that a *remote administrator* is notified. Moreover, Richardson expressly teaches that it is a benefit provide notice remotely so as to allow an administrator to correct the problem before the end-user notices a problem, and so as to not require the administrator to be present at the network device (¶ 12).

In addition, Tindal and Richardson each disclose systems in which connectivity and/or usage of a network computer is being monitored remotely by a network manager and administrator. Tindal and Richardson fail, however, to disclose that any health engine subsystem includes an open framework that has a standardized interface allowing *external service providers* to register their own service modules with the system. Instead, the health monitoring appears to be performed by a self-contained system, rather than an open, extensible framework as recited above in combination with the other claim elements.

For at least these reasons, as well as those discussed during the interview, Applicant respectfully submits that the rejections of record are overcome. In view of the foregoing, Applicant respectfully submits that the other rejections to the claims are now moot and do not, therefore, need to be addressed individually at this time.[4] It will be appreciated, however, that this should not be construed as Applicant acquiescing to any of the purported teachings or assertions made in the last action regarding the cited art or the pending application, including any official notice. Instead, Applicant reserves the right to challenge any of the purported teachings or assertions made in the last action at any appropriate time in the future, should the need arise. Furthermore, to the extent that the Examiner has relied on any Official Notice, explicitly or implicitly, Applicant specifically requests that the Examiner provide references supporting the teachings officially noticed, as well as the required motivation or suggestion to combine the relied upon notice with the other art of record.
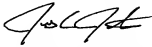
In the event that the Examiner finds remaining impediment to a prompt allowance of this application that may be clarified through a telephone interview, the Examiner is requested to contact the undersigned attorney by telephone at (801) 533-9800.

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[4] Nevertheless, Applicant also respectfully submits that the cited references also fail to teach or suggest various other limitations found in the independent and/or dependent claims. For instance, inasmuch as Tindal and Richardson deal with network administration, they fail to teach or suggest wherein the personal computer is in a standalone configuration (claim 50). The cited art also fails to teach or suggest that remedial actions are filtered to ensure that actions of various provider modules do not conflict (claim 49), determining that tasks cannot be executed simultaneously and disabling execution of one of the tasks in the display to the end-user (claim 51), ensuring that two remedial actions do not render an overall negative result (claim 52), timing mutually exclusive remedial actions to occur sequentially (claim 53), displaying pop-ups to the end-user when health of the personal computer is dangerously poor (claim 54), each of the multiple provider modules providing a health score and combining the health score into a composite, overall score (claim 55). Moreover, Tindal and Richardson expressly deal with connectivity and storage issues, and fail to disclose a system in which a personal computer is monitored by multiple service modules of various external providers and which include backup, security, firewall, and anti-virus modules.

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